

PART B - FEE(S) TRANSMITTAL

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20277 7590 07/26/2007

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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/565,123 | 01/19/2006 | Ion Benca | 0343370429 | 6154 |

TITLE OF INVENTION: APPARATUS FOR MEASURING THE CRUSHING STRENGTH OF MICRON SUPERABRASIVES

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|--|--|----------------|---------------------|-------------------------------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$0 | \$1700 | 10/26/2007 |
| EXAMINER | ART UNIT | CLASS-SUBCLASS | | 08/23/2007 AWONDAF2 00000095 500417 | 10565123 | |
| NOORI, MAX H | 2855 | 073-824000 | | 01 FC:1501 1400.00 DA | | |
| | | | | 02 FC:1504 300.00 DA | | |
| | | | | 03 FC:1501 6.00 DA | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | 2. For printing on the patent front page, list | | | | | |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | | | | | |
| <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ENGIS CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Wheeling, Illinois

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

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 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500417 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date August 22, 2007

Typed or printed name

Michael A. Messina

Registration No. 33,424

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